FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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ł	OMB APPROVAL
	OMB Number:
	Expires:
	Estimated average burden
	hours per response

SEC USE ONLY								
Prefix		Serial						
DATE RECEIVED								

(• /										
Name of Offering (Deheck if this is an amendment and name has changed, and indicate change.)										
Clarion Lion Properties Fund Holdings	Clarion Lion Properties Fund Holdings REIT, LLC									
Filing Under (Check box(es) that apply): [Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE									
Type of Filing: ☑ New Filing ☐ Amendment										
	A. BASI	IC IDENTIF	CATION	DATA						
1. Enter the information requested about th	e issuer				070	41313				
Name of Issuer (check if this is an amer	ndment and name has cl	hanged, and in	dicate cha	inge.)		+1010				
Clarion Lion Properties Fund Holdings	REIT, LLC					·				
Address of Executive Offices	(Nu	mber and Stre	et, City, S	tate, Zip Code)	Telephone Number (In	cluding Area Code)				
230 Park Avenue, New York, New York	10169									
Address of Principal Business Operations	mber and Stre	et, City, S	tate, Zip Code)	Telephone Number (In	elephone Number (Including Area Code)					
(if different from Executive Offices)					PROC	<u> ESSED</u>				
Brief Description of Business						_				
Invest in and manage a diversified portf	LJAN	2 2 2007 <i>E</i>								
Type of Business Organization						, = 2001				
□ corporation	☐ limited partnership,	, already form	ed	☑ other (please specify): limited	liability company				
□ business trust	☐ limited partnership,	to be formed				ANCIAL				
		Month	Year							
		1 2	0 2	☑ Actual □	Estimated					
Actual or Estimated Date of Incorporation or Organization:										
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:										
CN for Canada; FN for other foreign jurisdiction)										

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☑ Beneficial Owner ☐ Executive Officer □ Director ☑ Managing Member Check Box(es) that Apply: ☐ Promoter Full Name (Last name first, if individual) Clarion Lion Properties Fund, LLC Business or Residence Address (Number and Street, City, State, Zip Code) c/o ING Clarion Partners, LLC, 230 Park Avenue, New York, NY 10169 ☐ Beneficial Owner □ Executive Officer ☐ Director ☐ General and/or Managing Partner Check Box(es) that Apply: ☐ Promoter Full Name (Last name first, if individual). Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter □ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer □ Director ☐ General and/or Managing Partner Check Box(es) that Apply: Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner

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Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

					B. IN	FORMA	TION AB	OUT OFFI	ERING		· -		•	
													Yes	No
1.	Has the	issuer solo	i, or does t	he issuer in	end to sell	l, to non-a	ccredited in	nvestors in t	his offeri	ng?	***********	1411	. 🛛	. 🗹
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE														
											. \$1,000			
										Yes	No			
3. Does the offering permit joint ownership of a single unit?										. 🗆	₹			
4.	similar r is an ass broker o the infor	emunerati ociated pe r dealer. I mation fo	on for solicerson or age of more that that broke	citation of p ent of a bro n five (5) p er or dealer	ourchasers ker or deal ersons to b	in connect er register	tion with s ed with the	e paid or givales of secur SEC and/od persons of	rities in th r with a s	e offering. tate or state	If a person es, list the n	to be listed ame of the	d	
'			f individua	ıl)										
H&L Equ														
Business of	or Reside	nce Addre	ess (Numbe	er and Stree	t, City, Sta	ite, Zip Co	ode)							
100 Color	ny Squar	e, Suite 2	120, Atlan	ıta, Georgi	a 30361									
Name of A	Associate	d Broker (or Dealer											
States in \	Which Pe	rson Liste	d Has Soli	cited or Inte	nds to Sol	icit Purch	asers							,
(Che	ck "All S	States" or o	check indiv	vidual State	s)							🗆 A	Il States	
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	[FL]	[GA]☑	[HI]	(ID)	
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]☑	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]☑	[ND]	(OH)	(OK) ☑	[OR]	[PA]☑	
	[RI]	[SC]	[SD]	[TN]☑	[TX]☑	[UT]	[VT]	[VA]☑	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name	e (Last na	ıme first, i	f individua	al)								-		
Business	or Reside	nce Addre	ess (Numbe	er and Stree	t, City, Sta	ite, Zip Co	ode)					_		
Name of A	Associate	d Broker (or Dealer											
States in \	Which Pe	rson Liste	d Has Soli	cited or Inte	ends to Sol	icit Purch	asers				<u> </u>			
												🗆 A	II States	
,	[AL]	[AK]	[AZ]			[CO]		[DE]		(FL)	[GA]	[HI]	[ID]	
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	(MT)	(NE)	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]	
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	(WV)	[WI]	(WY)	[PR]	
Full Name		me first, i	f individua									<u></u>		
								 						
Business	or Reside	nce Addre	ess (Numbe	er and Stree	t, City, Sta	ite, Zip Co	ode)							
Name of A	Associate	d Broker (or Dealer											
States in \	Which Pe	rson Liste	d Has Soli	cited or Inte	ends to Sol	icit Purch	asers							
											*****	🗆 A	ll States	
([AL]	[AK]	(AZ)	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]	
	[IL]	[IN]	[IA]	[KS]	(KY)	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]	
	(RI)	[SC]	[SD]	(TN)	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, if necessary.)

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	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PI	ROC	EEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate fering Price		Amount Alread Sold
	Debt	<u>\$</u>	-0-	\$	-0-
	Equity	\$	125,000	<u>\$</u>	125,000
	☐ Common ☑ Preferred	_			
	Convertible Securities (including warrants)	\$	-0-	\$	-0-
	Partnership Interests	\$	-0-	\$	-0-
	Other (Specify)	\$	-0-	\$	-0-
		<u></u>	125,000	•	125,000
	Answer also in Appendix, Column 3, if filing under ULOE.	<u></u>	123,000	₽_	123,000
	who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited Investors		Number Investors	<u>\$</u>	Aggregate Dollar Amount of Purchases 125,000
	Non-accredited Investors		-0-	s	-0-
	Total (for filings under Rule 504 only)			\$	-0-
	Answer also in Appendix, Column 4, if filing under ULOE.			_	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.				
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505			<u>\$</u>	
	Regulation A			<u>\$</u>	
	Rules 504			<u>\$</u>	
	Total	_		<u>\$</u>	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				

Other Expenses (identify) \$24,750 consulting fees; \$1,667 initial set-up fee; \$2,000 filing fees

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-0-

-0-

-0-

6,250

28,417 64,667

30,000

\$60,333 b. Enter the difference between the aggregate offering price given in response to Part C- Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each 5. of the purposes shown. If the amount of any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payments to Officers, Payments to Directors, & Others Affiliates Salaries and fees **⊠** \$ Purchase, rental or leasing and installation of machinery and equipment....... Ø \$ Ø \$ Acquisition of other businesses (including the value of securities involved in this offering that may be **Ø** \$ used in exchange for the assets or securities of another issuer pursuant to a merger) -0-**Ø** \$ 60,333 Ø \$ Total Payments Listed (column totals added)..... \$ 60,333 D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Date Issuer (Print of Type) Clarion Lion Properties Fund Holdings REIT, LLC January 8, 2007 Name of Signer (Print or Type) Title of Signer (Print or Type) Authorized Signatory for ING Clarion Partners, LLC, the manager of Clarion Lion Properties Stephen B. Hansen Fund, LLC, the managing member of the Issuer

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)